| | Cas | e 15-82405 | D0C 2 | | ument | Page 1 of 2 | 30/13 18.17.34 | Desc Main |
|---------------------------|--|--|-----------------|------------|---------------------------|---|---|-----------------------------------|
| Fill | in this informat | ion to identify your c | ase: | | | | | |
| | otor 1 | Simone P. Offa | rd | | | | | |
| Debtor 2 | | First Name Dawn Michelle | Offard | ldle Name | | Last Name | | |
| (Sp | ouse if, filing) | First Name | Mid | ldle Name | | Last Name | | |
| Uni | ted States Ban | kruptcy Court for the | : NORTHI | ERN DIST | RICT OF ILLI | INOIS | | |
| Case number (if known) | | | | | | - | | ☐ Check if this an amended filing |
| | ficial Form | | la ta Da | . 4la a 🖵: | | in In atallian | -1- | 40/44 |
| Ар | plication | tor individua | is to Pay | tne Fi | ling Fee | in Installmer | nts | 12/14 |
| | rmation. | nd accurate as possify Your Proposed I | | · | eople are fili | ng together, both a | re equally responsib | le for supplying correct |
| | <u> </u> | | | | | | | |
| 1. | Which chapter of the Bankruptcy Code are you choosing to file under? | | | _ | Chapter 7 | | | |
| | you oncomi | g to me under . | | | Chapter 1 | | | |
| | | | | | Chapter 1: Chapter 1: | | | |
| 2. | You may app four installm propose to p | _ | propose to p | | | | | |
| | | e sure all dates are add the payments y | | | | □ With the fi | iling of the petition | |
| | to pay. | | | \$ | 83.75 | _ | ore this date | 10/30/15 |
| | | | | · — | | _ 011 01 0010 | ore triis date | MM / DD/ YYYY |
| | | pose to pay the enti | | • | | 0 | | |
| bankruptcy c | | 20 days after you file this case. If the court approves your the court will set your final | | \$ | 83.75 83.75 | On or before this date On or before this date | this date | 11/29/15 MM / DD/ YYYY |
| | | | | \$ | | | this date | 12/29/15 |
| | payment time | etable. | | + \$ | 02 7E | On or hoforo | this date | MM / DD/ YYYY |
| | | | | + > | 83.75 | On or before | triis date | 1/28/16 MM / DD/ YYYY |
| | | | Total | \$ | 335.00 | Your total must equ | ual the entire fee for th | ne chapter you checked in line 1. |
| Par | rt 2: Sign | Below | | | | | | |
| | | | | | | | | |
| • | signing here, y erstand that: | ou state that you a | re unable to | pay the fu | II filing fee a | at once, that you wa | int to pay the fee in i | nstallments, and that you |
| | | nust pay your entire rer, or anyone else f | | | | | any more property to | an attorney, bankruptcy petition |
| | You m | nust pay the entire fe | ee no later tha | an 120 day | s after you fi | | , unless the court late | r extends your deadline. Your |
| | If you | will not be discharge do not make any pa be affected. | | | | cy case may be dism | issed, and your rights | in other bankruptcy proceedings |
| Y | /s/ Simone P | Offerd | v | Isl Daws | Michalla C | Offerd V | /s/ Daniel A. Serie | ngor |
| ^ | Simone P. O | | ^ | | Michelle C chelle Offa | | /s/ Daniel A. Springe Daniel A. Springe | |
| | Signature of D | | | | of Debtor 2 | - - | | e and signature, if you used one |

Date

Date <u>September 30, 2015</u> MM / DD / YYYY

Date **September 30, 2015**MM/ DD / YYYY

September 30, 2015 MM / DD / YYYY

Case 15-82465 Doc 2 Filed 09/30/15 Entered 09/30/15 18:17:34 Desc Main Document Page 2 of 2

| | | Docume | iii Pa | .ge 2 01 2 | |
|--|--|---------------------|----------------------|---|-----------------------------------|
| Fill in this information | on to identify your case: | | | | |
| Debtor 1 Debtor 2 | Simone P. Offard First Name Dawn Michelle Offar | Middle Name | Last I | Name | |
| (Spouse if, filing) | First Name | Middle Name | Last I | Name | |
| United States Bank | ruptcy Court for the: NORTHERN | | DISTRICT OF ILLINOIS | | |
| Case number (<i>if kn</i> Chapter filing under | | | | Chapter 7 Chapter 11 Chapter 12 Chapter 13 | |
| Order Appro | ving Payment of I | iling Fee in Ir | nstallme | nts | |
| After considering | g the <i>Application for Inc</i> | dividuals to Pay th | ne Filing Fe | ee in Installments (Offic | cial Form B 3A), the court orders |
| ☐ The debtor(s) | may pay the filing fee | in installments on | the terms | proposed in the applica | ation. |
| ☐ The debtor(s) | must pay the filing fee | according to the | following t | erms: | |
| <u>Y</u> | ou must pay | On or | before th | is date | |
| \$ | | | | | |
| · | | Month | / day / yea | ar | |
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| | | | | | |
| | | | | | |
| | e is paid in full, the deb anyone else for servic | | | | ansfer any additional property to |
| | | By the | court: | | |
| | Month / day / yea | • | U | Inited States Bankrupto | cy Judge |